

EMS for Children Committee Meeting
Richmond Marriott West
Richmond, VA
April 10, 2008
3-5 p.m.

Members Present:	OEMS Staff:	Others:
Theresa Guins , MD, EMSC, Committee Chair/Pediatric Medical Director	Gary Brown , Director, OEMS	
David P. Edwards , OEMS EMS for Children Coordinator	Beth Singer , Public Information Officer, OEMS	
Petra Connell , EMSC Principal Investigator Representative		
Paul Sharpe , OEMS Trauma/Critical Care Coordinator		
Betsy Smith , RN, NREMT-P, Parent Representative		
Barbara Kahler , MD, VA AAP Representative		
Kimberly Burt , DMV, Highway Safety Office		
Cathy Fox , Virginia Emergency Nurses Association		
Heather Board , VDH, Office of Injury Prevention		
Bill Downs , Regional EMS Council Representative		
Kae Bruch , School Nurse		

Topic/Subject	Discussion	Recommendations, Action/Follow-up; Responsible Person
Call to order:	The meeting was called to order by Dr. Guins at 3:04 p.m. Everyone around the room introduced themselves.	
Approval of Minutes from January 17, 2008 Meeting:	A motion was made to approve the minutes.	The minutes were approved as submitted.
Chair Report – Dr. Theresa Guins:	<p>a. Child Abuse and Neglect Legislation Update The bill to add EMS providers to the list of mandated reporters of child abuse was successful. After several meetings it was finally approved by both the house and the senate unanimously and signed by the governor. The EMS personnel may report directly to the child abuse hotline or to their local DSS office, and if they transported the child in question they have the alternative of reporting to the attending physician (who should then be asked to make the report). Many thanks to the many individuals and organization who donated time and energy to this effort.</p> <p>b. Representative for Professional Development Committee As mentioned previously, we are required to send a representative to the Professional Development Committee and I would like to ask David Edwards to be that representative as he has expressed an</p>	

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	<p>interest to do so if no others are willing. The Professional Development Committee works very closely with the Medical Direction Committee.</p> <p>c. Miscellaneous The Office of EMS is considering the re-designation of the regional councils across the state. This issue has been discussed for the past twenty years, however, during the past year or year and a half, it has resurfaced. A consulting firm performed a study and provided a report to the advisory board about the consolidation of service areas and other recommendations. The information is located on the VDH Office of EMS website under the “Regional Coordination” tab. A Process Action Team has been formed consisting of fourteen EMS leaders from across the state to study the process and decide what action to take and ultimately make a recommendation to the advisory board. I am serving on the team and will keep you updated.</p> <p>As stated at the last meeting, we discussed that my EMS Advisory Board term will end in August. I have spoken with Dr. Foster and she has accepted the offer to chair this meeting. I will fill the role of EMSC Principal Investigator. Petra and Betsy will share the Parent Representative role.</p>	
OEMS Report – Paul Sharpe:	<p>a. General Assembly Update All bills have been settled and signed by the governor. The Mandatory Reporting of Child Abuse was the most contentious bill we had this year. A new Stroke Triage designation process was written into law. I anticipate that STEMI will be coming up in the near future as well.</p> <p>The Department of Rehabilitative Services had a registry that collected injury related data. Their registry was eliminated this year, so they are going to use our trauma registry data and dual reporting will no longer be necessary. This will take effect July 1. It was asked how the DRS database differed from VHI. The DRS collects injury incidents. The trauma registry collects emergency department data. VHI is based on hospital admission. Theirs is more billing oriented, ours is more triage oriented.</p> <p>The \$4 for life increased to \$4.25 for life. For every motor vehicle registration, \$4 is donated to the Rescue Squad Assistance Fund and our office. Now the Assistance Fund will receive \$4.25. This equates to \$1.5 million which goes toward education and training of the EMTs and volunteers.</p> <p>b. EMS Registry Update We have a state approved IT Planner to help assist with this project. We hope to see some implementation of the program by the beginning of next year. Jodi has been promoted to oversee the Emergency Medical Informatics unit. Christy and Russ will now be supervised by Jodi.</p> <p>c. Miscellaneous A State Medical Director position has been approved as a wage position. OEMS will soon be interviewing for this position. We hope that they will be able to start July 1.</p>	

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	<p>We are reevaluating the trauma triage process, seeing what works and what doesn't. We will share the outcomes when we get those. We have also sent out a survey to EMS providers to get feedback on the trauma triage process.</p> <p>The trauma center fund was in jeopardy of losing its funding this year, but it stayed the same.</p> <p>The DDNR regulations are going to the Notice of Intended Regulatory Action (NOIRA) to be updated. The language needs to be modernized and more functional. We will keep you posted on this.</p> <p>A new task force has been formed to have a standard of care in all environments but specifically with sexual and domestic violence. It's being headed by the Friends of Nurse Examiners (FNE) group. I volunteered to sit on the task force. Our first meeting is May 5th.</p> <p>Beth Singer May is National Trauma Awareness month. The theme is Traumatic Brain Injury in Children. We will be proactive in putting together some information. David Edwards is going to star in the Office's first uTube video.</p> <p>Last year at symposium, we wanted to have teddy bears at the banquet to give to all the providers for their ambulances for pediatric patients, but we weren't successful in getting donations. So this year we will go internally. I have talked to some people on the 13th floor about putting in boxes and sending an email to ask for teddy bear donations. It will be similar to the Toys for Tots program.</p> <p>Our Office of EMS blog is now up and running. It can be found at: http://virginiaems.wordpress.com/ The office also has a myspace page. It is www.myspace.com/virginiaems. We have links to these on our website also.</p> <p>Gary Brown We are excited about our new Commissioner, Karen Remley. She attended one of our staff meetings and she stayed about two hours. She also attended one of our Advisory Board Meetings. I feel that she is very supportive of EMS.</p>	
EMSC Program Report-David Edwards:	<p>a. EMSC State Partnership Grant Update We are officially starting the second year of the State Partnership grant. My first year anniversary is in June. A huge focus is the Performance Measures that we talked about at the last meeting. (Handouts were distributed to each committee member present.) At the next meeting, we will go down the list and discuss where we are. The annual grantee meeting will be June 25, 26 27. On June 24, the National Association of Emergency Medical Services Officials (NAEMSO) will meet, and part of that day will be devoted to creating a new council; the EMSC Coordinators Council.</p> <p>b. Performance Measures Surveys (Hospital & Pre-Hospital)</p>	

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	<p>We will be sending out surveys of all kinds. We will be required to eventually achieve an 80% response compliance level with our survey. As for EMS agencies, I will need to get 497 more survey responses in order to reach the 80% level. VHHA has helped us by making several appeals to the hospitals to complete these surveys.</p> <p>c. Flex Grant Funds Update A memo of agreement (MOA) has been finalized allowing OEMS to spend \$10,000 in grant funds to support assessing and improving critical access hospital (CAH) capabilities in regard to pediatric emergency care. Site visits, educational packets and equipment incentives will be primary tools in achieving these objectives. Our goal is to sort hospital emergency departments into three categories: 1) Pediatric Critical Care Level; 2) Approved for Pediatrics; and 3) Stand-by Emergency Departments. So far this is a voluntary process, and we believe it would be a good marketing tool for them. We will actually be selected hospitals in a two-stage approach; a visit to assess their current situation, then when they know which level they wish to achieve we will provide guidelines and resources to assist them in attaining the appropriate status. We've already started that process in the Roanoke area as part of our participation in rural health planning for the state.</p> <p>Do you have it mapped out as to which hospitals you want to visit first?</p> <p>We will start with the Critical Access Hospitals (CAH) and then other small rural hospitals. This will probably be a 3-5 year process.</p> <p>d. Education Materials for Mandatory Reporting Implementation OEMS has tentatively planned an EMSAT program in August. We have some other things in mind. I would like to ask a few members of the committee to become an action team to look at the materials and decide what should be done to implement the reporting materials. We will have anything from a 1 page ad, a short PowerPoint, a long PowerPoint, posters, etc. Department of Social Services (DSS) has some excellent existing material online for any mandated reporter of child abuse.</p> <p>Will any of the materials be ready by the instructor update in June?</p> <p>Those conducting the updates are fully aware of the new regulation and will share this material. Beth has started on some laminated cards with the children's DSS hotline on one side and the adult DSS hotline on the other side. We would also like to get this on TRAINVirginia so that the providers can take a short online course and get CE's for it.</p> <p>e. Miscellaneous The OEMS EMSC program has been chosen for a HRSA Performance Review. The review is a quality improvement tool for states with HRSA grants, and they have just begun using these for participants in the federal EMS for Children program. The on-site portion of the review will be July 23-24; I will be</p>	

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	<p>contacting some of you for assistance if needed.</p> <p>The Wakefield Act is still up in the air. It passed the House and is still pending in the Senate.</p>	
Committee Member Organization Reports:	<p>Dr. Barbara Kahler: Dr. Colleen Kraft who is currently the president of the Virginia Academy of Pediatrics has been nominated for the national position as President of the National Academy.</p> <p>Kae Bruch: Unfortunately, our two legislative bills did not pass. One was to mandate a school nurse coordinator for all public school systems in the commonwealth. There are some school systems that don't have one school nurse. The other was to have one school nurse per school. The majority of the school systems share school nurses with other schools. There has been an improvement on the turn around time for a nurse trying to get a provider number. It used to take 2 to 4 months, now it takes about 1 to 2 months to get that provider number. The Department of Education has now completed through the Office of Student Services Safe and Drug Free Schools program; the new Crisis Management and Emergency Response for Schools book. I was on that committee. Unfortunately, they have not obtained the funding to print the book, so I'm not sure when these will go out to the schools. There is a need for nurses to be more involved in Emergency planning within the school systems and in the localities.</p> <p>Heather Board: July 22–23 is the 2008 Injury Prevention Symposium in Richmond. We are very excited because we are going to be releasing the State Injury Prevention Plan. On our website, is the 2006 Injury Hospitalization and Death report based on the VHI data. If you would like a copy, you can get one from the website or contact me and I will get one to you.</p> <p>Cathy Fox: ENA Report—recording was inaudible—fill in blanks at July 10 EMSC Committee mtg...</p> <p>Betsy Smith: We are near completion of the SCOPE kits to assist those who wish to conduct this course throughout the state. Each regional council will receive once complete instructor kit, including a specially made doll with modifications to accept monitoring devices.</p> <p>Kimberly Burt: We are in the completion phase of receiving the 2009 grant applications. We have received over 200 applications and are reviewing those and making recommendations to present to our allocations committee on May 22. We are hosting our annual conference on Transportation Safety on June 11 – 13 in Portsmouth. We have a wide variety of sessions. There will be sessions for young drivers, focusing on seatbelt safety and teen drinking. More information is on our website.</p>	

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	<p>Petra Connell: I have nothing to report, but I have a question. For EMS Week, particularly on Wednesday, are there any plans to do anything since EMSC is now officially in VDH?</p> <p>Per Beth Singer, they are starting a campaign on May 21 collecting teddy bears for children who end up in emergency situations. The bears will be distributed to EMS agencies throughout Virginia. Also, we sent out the EMS Week planning kits to agencies. One of the things that were in the planning kit this year was partnering with the Children's Museum. We will have to find out what the Children's Museum is offering.</p>	
Public Comment:	None.	
Old Business:	<p>a. CSHCN Tool Kit (Previously addressed)</p> <p>b. Child Restraints in Ambulances</p> <p>Per Dave, we continue to work on this, and Frank Cheatham is assisting with this project. Dr. Nadine Levick (a famous child restraint safety advocate) was in Charlottesville recently and Frank met her. She mentioned that the Virginia EMSC committee was looking into this problem while she was giving her lecture. OEMS/EMSC has been active participating in related webcasts with the EMS Safety Foundation. We are still gathering best practices for ambulance child restraints, and we intend to approach the Insurance Institute for Highway Safety and challenge them to assist in the evaluation of current and future child restraint devices..</p>	
New Business:	<p>a. Implementation Plan for Mandatory Reporting of Child Abuse (Addressed earlier in the meeting.)</p> <p>b. Links and Resources for EMSC Website</p> <p>We have a temporary replacement in updating our website right now due to Tracy Mason being out on maternity leave, but we plan to update the EMSC section of the website this summer. I am gathering links and other pediatric resources, so if you have any links that you would like to add, please email them to David Edwards for consideration.</p> <p>c. Other</p> <p>We are advocating future pediatric topics as OEMS plans their future education agenda, so please forward any suggestions or ideas for topics to David.</p>	<p>Send your favorite pediatric links to David Edwards via email.</p> <p>Send pediatric topics to David Edwards via email.</p>
Adjournment:	Meeting was adjourned at approximately 4:40 p.m.	Next meeting is July 10 th at the Richmond Marriot West.